Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-99)

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

FORM D

RECORD B.B.C.

NOV A 2002

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number: Expires:	3235-0076 May 31, 2002						
Estimated average							
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	SEC USE ON	LY
Prefix	1	Serial
	DATE RECEIV	ED
	1	

Name of Offering Prospect Resi	g (□check if this is an a dential Fund	mendment and nan	ne has changed, and in	dicate change.)		
Filing Under (Che	eck box(es) that apply):	□Rule 504	□Rule 505	⊠Rule 506	☐ Section 4(6)	ULOE
Type of Filing:	■ New Filing	□Amendment				
			BASIC IDENTIFIC	CATION DATA		
1. Enter the inform	mation requested about	the issuer				
Name of Issuer Yugen Kaisha	(□check if this is an a Prospect Funding Con		ne has changed, and in	dicate change.)	020	65000
Address of Execu Uchisaiwai-che	tive Offices o 2-2-3, Chiyoda-ku, Te	okyo 100-0011, Jap	,	, City, State, Zip Code	e) Telephone Number (81-3) 3506-2048	(Including Area Code)
Address of Princip	pal Business Operations outive Offices)		(Number and Street	, City, State, Zip Cod	e) Telephone Number	(Including Area Code) PROCESSED
Brief Description	of Business					<i>A</i>
Asset manage	ment of real estate fur	ds				MOV 1 8 2002
Type of Business	Organization					THOMEON
□ corporation		□ limite	d partnership, already	formed \square	other (please specify):	THOMSON
□business trus	st	□ limite	d partnership, to be for	rmed		FINANCIAL
Actual or Estimat	ed Date of Incorporation	or Organization:		Month	Year 0 1 ⊠ Actu	al □ Estimated
Actual of Estimat	ed Date of Meorporation	i oi Oigainzation.		<u> </u>	B Actu	ai 🗀 Estimated
Jurisdiction of Inc	corporation or Organiza	`	letter U.S. Postal Serv nada; FN for other fore		State: F N	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have deep made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer,
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - · Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	□Promoter	⊠Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Prospect Funding Corp.					
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
P.O. Box 1043GT, George Tow	n, Cayman Island				
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Isawa, Hiroshi					
Business or Residence Address		reet, City, State, Zip Code)			•
Tohoku 1-6-26, Niiza-shi, Saita	ma-ken, Japan				
Check Box(es) that Apply:	□ Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	□ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	□Promoter	□Beneficial Owner	□ Executive Officer	☐ Director	□ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	ndividual)				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director	□ General and/or Managing Partner
Full Name (Last name first, if ir	ndividual)				
Business or Residence Address	Number and St	reet, City, State, Zip Code)	·	 	····

				B. 1	NFORMAT	ION ABOU	T OFFERI	NG				
											Yes	No
1.	Has the issu	er sold, or do	es the issuer inte	end to sell, to	non-accredite	ed investors	n this offerin	g?			. 🔲	\boxtimes
				Answer als	so in Appendi	ix, Column 2	, if filing und	ler ULOE.				
2. What is the minimum investment that will be accepted from any individual?							. \$7	5,357				
											Yes	No
3.	Does the of	fering permit	oint ownership	of a single ur	nit?						. 🗆	\boxtimes
4.	similar rem an associate or dealer. I	uneration for d person or a f more than	quested for each solicitation of p gent of a broker five (5) persons er or dealer only	urchasers in or dealer reg s to be listed	connection istered with are associa	with sales of the SEC and ated persons	f securities in for with a state of such a b	n the offering ite or states, roker or dea	g. If a persor list the nam der, you ma	n to be listed te of the brok y set forth th	is er ne	
Full N	Name (Last n	ame first, if in	idividual)									
Busin	ess or Resid	ence Address	(Number an	d Street, City	, State, Zip C	Code)						
Name	of Associat	ed Broker or l	Dealer							<u>-</u>	·	
States	s in Which P	erson Listed I	Ias Solicited or	Intends to So	licit Purchase	ers					_	
(Cl	neck "All Sta	ites" or check	individual State	s)							🗆 A	All States
[AL]] [AK] [AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HII)	[ID]
(IL)	_		[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT				[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	-		[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	Name (Last r	name first, if in	ndividual)							,		
				,								
Busir	ness or Resid	ence Address	(Number an	d Street, City	, State, Zip C	Code)						
Name	e of Associat	ed Broker or	Dealer								···	
States	s in Which P	erson Listed I	Has Solicited or	Intends to So	licit Purchase	ers					· · · · · · · · · · · · · · · · · · ·	
			individual State								🗆 A	All States
[AL] [AK	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	ιнп	[ID]
[IL]			[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]				[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	-			[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full 1	Name (Last 1	name first, if i	ndividual)		_ _							
Duri	Di-	lence Address	Olymphanan	d Stee at Cite	y, State, Zip C	2-4-1		· · · · · · · · · · · · · · · · · · ·			<u>.</u>	
Dusii	ness of Resid	ience Address	(Number at	ia Sireci, Cit	y, State, Zip C	Loue)						
Nam	e of Associa	ted Broker or	Dealer			·····						
State	s in Which F	Person Listed	Has Solicited or	Intends to So	licit Purchase	ers						
			individual State								🗆 A	All States
[AL] [AK	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]				[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]			· -	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
IRI				(TX)	TUTI	[VT]	[VA]	[WA]	(WV)	[WI]	(WY)	IPR1

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total am already sold. Enter "0" is answer is "none" or "zero." If the transaction is an exchange offe check this box and indicate in the columns below the amounts of the securities offered exchange and already exchanged.	ring,				
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$_			\$_	
	Equity	\$			\$_	
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$_			\$_	
	Partnership Interests	\$_	150,715,9	00	\$_	11,333,835
	Other (specify)	\$			\$_	
	Total	\$_	150,715,9	00	\$_	11,333,835
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securitithis offering and the aggregate dollar amounts of their purchases. For offerings under Rule indicate the number of persons who have purchased securities and the aggregate dollar am of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	504,	Number Investors			Aggregate Dollar Amount of Purchases
	Accredited Investors	· · · · <u> </u>		3	\$_	11,333,835
	Non-accredited Investors	· · · · <u> </u>			\$_	
	Total (for filings under Rule 504 only)	· · · · <u> </u>	-		\$_	
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) morprior to the first sale of securities in this offering. Classify securities by type listed in Part Question 1.	onths				Dollar Amount
	Type of offering		Type of Security			Sold
	Rule 505	· · · · <u> </u>			\$_	
	Regulation A	· · · ·			\$_	
	Rule 504	· · · · · <u> </u>			\$_	
	Total	<u> </u>			. \$_	·
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.	f the				
	Transfer Agent's Fees				\$_	0
	Printing and Engraving Costs		• • • • • • • • • • • • • • • • • • • •	\boxtimes	\$_	2,260
	Legal Fees			\boxtimes	\$_	45,215
	Accounting Fees		• • • • • • • • • • • • • • • • • • • •	⊠	\$_	45,215
	Engineering Fees		••••		\$_	0
	Sales Commissions (specify finders' fees separately)				\$_	0
	Other Expenses (identify) Financial Advisory Fee	· · ·		⊠	\$_	75,358
	Total			×	\$_	168,048

_	C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSE	S AND	USE OF PROCE	EDS	
	b. Enter the difference between the aggreg Question 1 and total expenses furnished in resp the "adjusted gross proceeds to the issuer."	\$11,165,78 7				
5.	Indicate below the amount of the adjusted grused for each of the purposes shown. If the estimate and check the box to the left of the est the adjusted gross proceeds to the issuer set for	amount for any purpose is not known, furni- imate. The total of the payments listed must of	sh an equal	Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees		□ _{\$} _		_ 🗆 s .	
	Purchase of real estate		□ \$ _		_ 🗆 s	
	Purchase, rental or leasing and installation	of machinery and equipment	□ _{\$} _		_ 🗆 s .	
	Construction or leasing of plant buildings	and facilities	□ s _		_ 🗆 s	·
	offering that may be used in exchange for	ng the value of securities involved in this or the assets or securities of another issuer	□ _{\$} _	•	_ 🗆 s .	
	Repayment of indebtedness		□ \$ _		_ 🗆 s .	
	Working capital		□ s _		_ 🗆 s .	
	Other (specify): <u>Trust beneficiary intere</u>	ests of certain real estate trusts	□ \$ _		_ Ø \$	11,165,783
			□ _{\$ _}		_ 🗆 s	
	Column Totals		□ \$ _		_ ⊠ ≴	11,166,787
	Total Payments Listed (column totals add	ed)		⊠ \$ <u>`//</u> ,	166;	787
		D. FEDERAL SIGNATURE			<u> </u>	
con	sissuer has duly caused this notice to be signed be stitutes an undertaking by the issuer to furnish to the issuer to any non-accredited investor pursua	the U.S. Securities and Exchange Commissio				
Issı	uer (Print or Type)	Signature		Date		<u> </u>
	gen Kaisha Prospect Funding Corp.	- COOK			-8-De	2
Nat	ne of Signer (Print or Type)	Title of Signer (Print or Type)				
Him	oshi Isawa	Representative Director and Presiden	t			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)